## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

9281-4670

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			5					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	<u> </u>	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*	0		X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS			l	nus 3 =	*	0		X43=		OR	X86=	0
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT	<del></del>				+145=		OR	+290=	0
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	110
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1)	1	(Colun		(Column 3)	1 -	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	* ENTATION OF MU	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESE	:NTAHON OF WIC	JLIIPLE DEF	'ENDEN I	CLAIIVI		1	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		,	40011. 1 CC			ADDII. 1 EE .						
		(Column 1) CLAIMS		(Colun	EST	(Column 3)	1 [	I	ADDI-	1	_	ADDI-
AMENDMENT B	_	REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	OL AINA	=	[	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDEN	CLAIM	<u> </u>	1	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		_	(DDII. I CC =			ADDII. 1 E.E.						
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	3: 1114	=	[	X43=		o'R	X86=`	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		<b>!</b>	+145=			+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR		
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	n 20, enter "20."	* A	DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		ther Previously Paid					er four	nd in the app	ropriate box	in col	umn 1.	